## HEALTH INSURANCE RATES - JANUARY 1, 2004

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|       |   |                 |                         |                               |                              |                                 | Plans For:<br>Medicare Supplements |                |                             |   | "M" Schedule and Non<br>Union Rates |                               |
|-------|---|-----------------|-------------------------|-------------------------------|------------------------------|---------------------------------|------------------------------------|----------------|-----------------------------|---|-------------------------------------|-------------------------------|
|       | HEALTH PLANS  | Monthly<br>Rate | Town<br>Monthly<br>Rate | Subscriber<br>Monthly<br>Rate | Subscriber<br>Weekly<br>Rate | Subscriber<br>Bi Weekly<br>Rate | Monthly<br>Rate                    | Weekly<br>Rate | Survivor<br>Monthly<br>Rate | "Cobra"  Monthly Rates Includes2% Admin Fee | Subscriber<br>Monthly<br>Rates      | Subscriber<br>Weekly<br>Rates |
| BLCI  | Blue Choice / Individual  | \$625.49        | \$469.13                | \$156.36                      | \$39.09                      | \$78.18                         |                                    |                | \$312.75                    | \$638.00                                    | \$156.36                            | \$39.09                       |
| BLCF  | Blue Choice / Family  | 1,563.62        | 1,172.74                | 390.88                        | 97.72                        | 195.44                          |                                    |                | 781.81                      | 1,594.89                                    | 390.88                              | 97.72                         |
| нмові | HMO Blue / Individual   | 391.34          | 352.22                  | 39.12                         | 9.78                         | 19.56                           |                                    |                | 195.67                      | 399.17                                      | 78.27                               | 19.57                         |
| HMOBF | HMO Blue / Family   | 1,009.97        | 908.97                  | 101.00                        | 25.25                        | 50.50                           |                                    |                | 504.99                      | 1,030.17                                    | 201.99                              | 50.50                         |
| HVDPI | Harvard Pilgrim / Individual  | 414.39          | 372.95                  | 41.44                         | 10.36                        | 20.72                           |                                    |                | 207.20                      | 422.68                                      | 82.88                               | 20.72                         |
| HVDPF | Harvard Pilgrim / Family  | 1,064.99        | 958.51                  | 106.48                        | 26.62                        | 53.24                           |                                    |                | 532.50                      | 1,086.29                                    | 213.00                              | 53.25                         |
| MMEDI | Major Medical / Individual  | 1,063.23        | 797.43                  | 265.80                        | 66.45                        | 132.90                          |                                    |                | 531.62                      | 1,084.49                                    | 265.81                              | 66.45                         |
| MMEDF | Major Medical / Family  | 2,791.37        | 2,093.53                | 697.84                        | 174.46                       | 348.92                          |                                    |                | 1,395.69                    | 2,847.20                                    | 697.84                              | 174.46                        |
| MHPI  | Master Health + / Individual  | 596.69          | 447.53                  | 149.16                        | 37.29                        | 74.58                           |                                    |                |                             |   | 149.17                              | 37.29                         |
| MHPF  | Master Health + / Family  | 1,546.80        | 1,160.08                | 386.72                        | 96.68                        | 193.36                          |                                    |                |                             |   | 386.70                              | 96.68                         |
| MEDEX | Medex III   | 292.35          | 219.26                  |                               |                              |                                 | 73.09                              | 18.27          | 146.18                      |   |                                     |                               |
| MNBLS | Managed Blue for Seniors  | 285.11          | 256.60                  |                               |                              |                                 | 28.51                              | 7.13           | 142.56                      |   |                                     |                               |
| HVDFS | Harvard First Seniority   | 192.00          | 172.80                  |                               |                              |                                 | 19.20                              | 4.80           | 96.00                       |   |                                     |                               |
|       | Effective March 1, 2004, Harvard 1st Seniority rates dropped from \$210 to \$192  |                 |                         |                               |                              |                                 |                                    |                |                             |   |                                     |                               |
|       | NOTE: MASTER HEALTH PLUS - ARLINGTON ADMINISTRATORS & ARLINGTON EDUCATION ASSOC ONLY - PARTICIPATION FROZEN AFTER JANUARY 1, 2000 |                 |                         |                               |                              |                                 |                                    |                |                             |   |                                     |                               |
|       |   |                 |                         |                               |                              |                                 |                                    |                |                             |   |                                     |                               |

| DENTAL INSURANCE: IF AFTER ENROLLED, YOU DROP DENTAL INS., YOU CAN'T ENROLL AGAIN. Only available to: "680", NAGE, Librarians, Fire, Patrolmen, Ranking Officers, Non-Union, M Schedule & Retirees |                 |                                 |                               |                              |                                 |                 |                |                             |   |                                |                               |
|--|-----------------|---------------------------------|-------------------------------|------------------------------|---------------------------------|-----------------|----------------|-----------------------------|---|--------------------------------|-------------------------------|
|  | Monthly<br>Rate | Town<br>Town<br>Monthly<br>Rate | Subscriber<br>Monthly<br>Rate | Subscriber<br>Weekly<br>Rate | Subscriber<br>Bi Weekly<br>Rate | Monthly<br>Rate | Weekly<br>Rate | Survivor<br>Monthly<br>Rate | "Cobra"  Monthly  Rates Includes2%  Admin Fee | Subscriber<br>Monthly<br>Rates | Subscriber<br>Weekly<br>Rates |
| Dental Blue / Individual   | 38.17           |                                 | 38.17                         |                              |                                 | 38.17           |                | 38.17                       | 38.93   | 38.17                          |                               |
| Dental Blue / Family   | 89.64           |                                 | 89.64                         |                              |                                 | 89.64           |                | 89.64                       | 91.43   | 89.64                          |                               |
|  |                 |                                 |                               |                              |                                 |                 |                |                             |   |                                |                               |